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REISSUE PATENT APPLICATION TRANSMITTAL

Address to: Assistant Commissioner for Patents Box Reissue Washington, DC 20231	Attorney Docket No.	055123.P086R
	First Named Inventor	Schaffer
	Original Patent Number	5,870,296
	Original Patent Issue Date (Month/Day/Year)	02/09/99
	Express Mail Label No.	EL466330343US

APPLICATION FOR REISSUE OF: Utility Patent Design Patent Plant Patent
(Check applicable box)

APPLICATION ELEMENTS (37 CFR 1.173)		ACCOMPANYING APPLICATION PARTS	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (PTO/SB/56) (Submit an original, and a duplicate for fee processing)		7. <input checked="" type="checkbox"/> Statement of status/support for all changes to the claims. See 37 CFR 1.173 (c).	
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		8. <input checked="" type="checkbox"/> Original U.S. Patent for surrender <input type="checkbox"/> Ribboned Original Patent Grant <input type="checkbox"/> Statement of Loss (PTO/SB/55)	
3. <input checked="" type="checkbox"/> Specification and Claims in double column copy of patent format (amended, if appropriate)		9. <input type="checkbox"/> Foreign Priority Claim (35 U.S.C. 119) (if applicable)	
4. <input checked="" type="checkbox"/> Drawing(s) (proposed amendments, if appropriate)		10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations	
5. <input checked="" type="checkbox"/> Reissue Oath/Declaration (original or copy) (37 C.F.R. § 1.175) (PTO/SB/51 or 52)		11. <input type="checkbox"/> English Translation of Reissue Oath/Declaration (if applicable)	
6. Original U.S. Patent currently assigned? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, check applicable box(es))		12. <input checked="" type="checkbox"/> Preliminary Amendment	
<input type="checkbox"/> Written Consent of all Assignees (PTO/SB/53)		13. <input type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)	
<input checked="" type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input type="checkbox"/> Power of Attorney (PTO/SB/96)		14. Other:	

15. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label <small>(Insert Customer No. or Attach bar code label here)</small>		<input type="checkbox"/> Correspondence address below		
Name	Roger W. Blakely, Jr. BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN, LLP			
Address	12400 Wilshire Boulevard Seventh Floor			
City	Los Angeles	State	CA	Zip Code
Country	USA	Telephone	714/557-3800	Fax

NAME (Print/Type)	Roger W. Blakely, Jr.	Registration No (Attorney/Agent)	25,831
Signature	<i>Roger W. Blakely</i>	Date	02/08/01

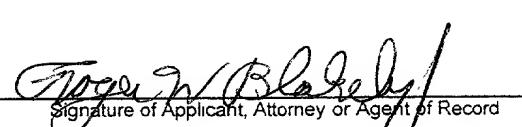
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(Reissue Patent Application Transmittal (PTO/SB/50) [17-1.1]—page 1 of 1)

PTO/SB/56 (08-00)

Approved for use through 12/30/2000. OMB 0651-0033
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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REISSUE APPLICATION FEE TRANSMITTAL FORM				Docket Number (Optional) 055123.P086R			
Claims as Filed - Part 1							
Claims in Patent	Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity		
			Rate	Fee	Rate	Fee	
(A) 21	Total Claims (37 CFR 1.16(j))	(B) 46	**** 25 =	x \$ ____ =	or	x \$ 18 =	450.00
(C) 2	Independent claims (37 CFR 1.16(i))	(D) 6	* 4 =	x \$ ____ =		x \$ 80 =	320.00
				Basic Fee (37 CFR 1.16(h))		\$ 710	
				Total Filing Fee	\$ 710	OR	\$ 1,480.00
Claims as Amended - Part 2							
(1) Claims Remaining After Amendment	(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity		
			Rate	Fee	Rate	Fee	
Total Claims (37 CFR 1.16(j))	***	MINUS	**	* =	x \$ ____ =	x \$ ____ =	
Independent Claims (37 CFR 1.16(i))	***	MINUS	*****	=	x \$ ____ =	x \$ ____ =	
				Total Additional Fee	\$	OR	\$
* If the entry in (D) is less than the entry in (C), Write "0" in column 3.							
** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.							
*** After any cancellation of claims.							
**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).							
***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).							
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. 02-2666 A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> A check in the amount of \$ 1,480.00 to cover the filing / additional fee is enclosed <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.							
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
02/08/01		 Signature of Applicant, Attorney or Agent of Record <u>Roger W. Blakely, Jr.</u> Typed or printed name					

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PTO/SB/66 (7-97)

Approved for use under PTO Rule 71(d). GPO:2000-2106

Under the Patent Protection Act of 1990, no patentee can be required to assign for a consideration of information which is deemed a valid USG control number.

REISSUE APPLICATION BY THE ASSIGNEE, OFFER TO SURRENDER PATENT		Doctet Number (Optional)
055123.P086R		
This is part of the application for a reissue patent based on the original patent identified below.		
Name of Patentee(s):		
Gregory L. Schaffer		
Patent Number	Date Patent Issued	
5,870,296	February 9, 1999	
Title of Invention: Dual Interleaved DC to DC Switching Circuits Realized in an Integrated Circuit		
<u>Maxim Integrated Products</u> is the assignee of the entire interest in the original patent.		
I offer to surrender the original patent.		
<input checked="" type="checkbox"/> A certificate under 37 CFR 3.78(b) is attached.		
I am authorized to act on behalf of the assignee.		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such wilful false statements may jeopardize the validity of the application, any patent issued thereon, or any patent to which this declaration is directed.		
Name of assignee		
Maxim Integrated Products, Inc.		
Signature of person signing for assignee	Date	
	2/8/01	
Typed or printed name and title of person signing for assignee		
Pirooz Parvarandeh, Vice President		

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(Reissue Application by the Assignee — Offer to Surrender Patent (PTO/SB/66) (17-3.1)—page 1 of 1)

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Docket No. 3927P006Z

STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Maxim Integrated Products, Inc.Application No./Patent No.: 5,870,296 Filing/Issue Date: 02/09/99Entitled: Dual Interleaved DC to DC Switching Circuits Realized in an Integrated CircuitMaxim Integrated Products, a Corporation

(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. the assignee of the entire right, title and interest; or
2. an assignee of an undivided part interest

in the patent application/patent identified above by virtue of either:

A. An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the Patent and Trademark Office at Reel , Frame , or for which a copy thereof is attached. Reel 8784 / Frame 0659

OR

B. A chain of title from the inventor(s) of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____ To: _____

The document was recorded in the Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.

2. From: _____ To: _____

The document was recorded in the Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.

3. From: _____ To: _____

The document was recorded in the Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached. Additional documents in the chain of title are listed on a supplemental sheet. Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the PTO. See MPEP 302-302.8]

The undersigned (whose title is supplied below) is empowered to sign this statement on behalf of assignee.

2/8/01

Date



Signature

Pirooz Parvarandeh

Typed or printed name

Vice President

Title

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